CLAIMS ONLY

Application Number	Filing Date
10/684359	

Applicant(s)

09-04-07

* May be used for additional claims or amendments

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		*		*		*	
	Indep	Depend	Indep	Depend	Indep	Depend		Indep	Depend	Indep	Depend	Indep	Depend
1			/				51						
2				/			52						
3				/			53						
4				/			54						
5				/			55						
6			—	—			56						
7				/			57						
8			/				58						
9				/			59						
10				/			60						
11				/			61						
12				/			62						
13				/			63						
14				/			64						
15			\				65						
16			\				66						
17			\				67						
18			\				68						
19			\				69						
20				/			70						
21				/			71						
22			—	—			72						
23			—	—			73						
24				/			74						
25				/			75						
26				/			76						
27			/				77						
28			—	—			78						
29				/			79						
30				/			80						
31			—	—			81						
32							82						
33							83						
34							84						
35							85						
36							86						
37							87						
38							88						
39							89						
40							90						
41							91						
42							92						
43							93						
44							94						
45							95						
46							96						
47							97						
48							98						
49							99						
50							100						
Total Indep			3				Total Indep						
Total Depend			18				Total Depend						
Total Claims			21				Total Claims						